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07-05-01

PTO/SB/05 (11-00)

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**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

|                        |  |
|------------------------|--|
| Attorney Docket No.    | 020699000310   |
| First Inventor         | Smith, G. Scott  |
| Title                  | STORAGE AND RETRIEVAL OF ENCRYPTED CONTENT ON<br>STORAGE MEDIA |
| Express Mail Label No. | EM358698235US  |

STANLEY

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning design patent application contents.

1.  Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)

2.  Applicant claims small entity status.  
See 37 CFR 1.27.

3.  Specification [Total Pages 9]  
(preferred arrangement set forth below)  

- Descriptive title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4.  Drawing(s) (35 U.S.C.113) [Total Sheets 3]

5. Oath or Declaration [Total Pages 2]

a.  Newly executed (original or copy)

b.  Copy from a prior application (37 CFR 1.63 (d))  
(for a continuation/divisional with Box 18 completed)

i.  **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).

6.  Application Data Sheet. See 37 CFR 1.76

|   |  |  |
|---|--|--|
| <b>ADDRESS TO</b>   |  | Assistant Commissioner for Patents<br>Box Patent Application<br>Washington, DC 20231 |
| <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (<i>Appendix</i>)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission<br/>(<i>if applicable, all necessary</i>)</p> <p>a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p>b. Specification Sequence Listing on:</p> <p>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</p> <p>ii. <input type="checkbox"/> paper number of pages</p> <p>c. <input type="checkbox"/> Statements verifying identity of above copies</p> |  |  |
| <b>ACCOMPANYING APPLICATIONS PARTS</b>  |  |  |
| 9. <input checked="" type="checkbox"/>  | Assignment Papers (cover sheet & document(s))  |  |
| 10. <input type="checkbox"/>  | 37 C.F.R. §3.73(b) Statement<br>( <i>when there is an assignee</i> )   | <input type="checkbox"/> Power of Attorney   |
| 11. <input type="checkbox"/>  | English Translation Document ( <i>if applicable</i> )  |  |
| 12. <input type="checkbox"/>  | Information Disclosure Statement (IDS)/PTO-1449  | <input type="checkbox"/> Copies of IDS Citations                                     |
| 13. <input type="checkbox"/>  | Preliminary Amendment  |  |
| 14. <input checked="" type="checkbox"/>   | Return Receipt Postcard (MPEP 503)<br>( <i>Should be specifically itemized</i> )                                     |  |
| 15. <input type="checkbox"/>  | Certified Copy of Priority Document(s)<br>( <i>if foreign priority is claimed</i> )                                  |  |
| 16. <input type="checkbox"/>  | Nonpublication Request under 35 U.S.C.<br>122(b)(2)(B)(i). Applicant must attach form PTO/SB/35<br>or its equivalent |  |
| 17. <input type="checkbox"/>  | Other:   |  |

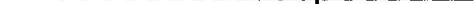
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation       Divisional       Continuation-in-part (CIP)      of prior application No: \_\_\_\_\_ / \_\_\_\_\_  
Prior application information:      Examiner: \_\_\_\_\_      Group Art Unit: \_\_\_\_\_

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

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|-------------------|---|-----------------------------------|--------|
| Name (Print/Type) | Fidel D. Nwamu  | Registration No. (Attorney/Agent) | 46,294 |
| Signature         |  | Date                              | 7/1/01 |

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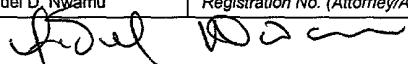
# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 750

| Complete if Known    |                 |
|----------------------|-----------------|
| Application Number   |                 |
| Filing Date          | 1/1/            |
| First Named Inventor | Smith, G. Scott |
| Examiner Name        |                 |
| Group Art Unit       |                 |
| Attorney Docket No.  | 020699-000310US |

| METHOD OF PAYMENT   |                 |                |                 | FEE CALCULATION (continued)   |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
|---|-----------------|----------------|-----------------|---|--|---------------------|--|----------------|-----------------|----------------|-----------------|-----------------|--|----------|-----|-----|-----|----|-------------------------------------|--|--|-----|----|-----|----|--|--|--|-----|-----|-----|-----|---------------------------|--|--|-----|-------|-----|-------|--|--|--|-----|------|-----|------|--|--|--|-----|--------|-----|--------|---|--|--|-----|-----|-----|----|--|--|--|-----|-----|-----|-----|---|--|--|-----|-----|-----|-----|--|--|--|-----|-------|-----|-----|---|--|--|-----|-------|-----|-----|--|--|--|-----|-----|-----|-----|------------------|--|--|-----|-----|-----|-----|--|--|--|-----|-----|-----|-----|--------------------------|--|--|-----|-------|-----|-------|---|--|--|-----|-----|-----|----|----------------------------------|--|--|-----|-------|-----|-----|------------------------------------|--|--|-----|-------|-----|-----|--------------------------------|--|--|-----|-----|-----|-----|------------------|--|--|-----|-----|-----|-----|-----------------|--|--|-----|-----|-----|-----|-------------------------------|--|--|-----|----|-----|----|---|--|--|-----|-----|-----|-----|---|--|--|-----|----|-----|----|--|--|----|-----|-----|-----|-----|---|--|--|-----|-----|-----|-----|--|--|--|-----|-----|-----|-----|---|--|--|-----|-----|-----|-----|---|--|--|---------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|-----------------------------------|--|--|--|--|--|---------------------|
| <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number <b>20-1430</b></p> <p>Deposit Account Name <b>Townsend and Townsend and Crew LLP</b></p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> |                 |                |                 | <p>3. ADDITIONAL FEES</p> <table border="1"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th colspan="2">Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>105</td> <td>130</td> <td>205</td> <td>65</td> <td colspan="2">Surcharge - late filing fee or oath</td> <td></td> </tr> <tr> <td>127</td> <td>50</td> <td>227</td> <td>25</td> <td colspan="2">Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>139</td> <td>130</td> <td>139</td> <td>130</td> <td colspan="2">Non-English specification</td> <td></td> </tr> <tr> <td>147</td> <td>2,520</td> <td>147</td> <td>2,520</td> <td colspan="2">For filing a request for reexamination</td> <td></td> </tr> <tr> <td>112</td> <td>920*</td> <td>112</td> <td>920*</td> <td colspan="2">Requesting publication of SIR prior to Examiner action</td> <td></td> </tr> <tr> <td>113</td> <td>1,840*</td> <td>113</td> <td>1,840*</td> <td colspan="2">Requesting publication of SIR after Examiner action</td> <td></td> </tr> <tr> <td>115</td> <td>110</td> <td>215</td> <td>55</td> <td colspan="2">Extension for reply within first month</td> <td></td> </tr> <tr> <td>116</td> <td>390</td> <td>216</td> <td>195</td> <td colspan="2">Extension for reply within second month</td> <td></td> </tr> <tr> <td>117</td> <td>890</td> <td>217</td> <td>445</td> <td colspan="2">Extension for reply within third month</td> <td></td> </tr> <tr> <td>118</td> <td>1,390</td> <td>218</td> <td>695</td> <td colspan="2">Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>128</td> <td>1,890</td> <td>228</td> <td>945</td> <td colspan="2">Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>119</td> <td>310</td> <td>219</td> <td>155</td> <td colspan="2">Notice of Appeal</td> <td></td> </tr> <tr> <td>120</td> <td>310</td> <td>220</td> <td>155</td> <td colspan="2">Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>121</td> <td>270</td> <td>221</td> <td>135</td> <td colspan="2">Request for oral hearing</td> <td></td> </tr> <tr> <td>138</td> <td>1,510</td> <td>138</td> <td>1,510</td> <td colspan="2">Petition to institute a public use proceeding</td> <td></td> </tr> <tr> <td>140</td> <td>110</td> <td>240</td> <td>55</td> <td colspan="2">Petition to revive - unavoidable</td> <td></td> </tr> <tr> <td>141</td> <td>1,240</td> <td>241</td> <td>620</td> <td colspan="2">Petition to revive - unintentional</td> <td></td> </tr> <tr> <td>142</td> <td>1,240</td> <td>242</td> <td>620</td> <td colspan="2">Utility issue fee (or reissue)</td> <td></td> </tr> <tr> <td>143</td> <td>440</td> <td>243</td> <td>220</td> <td colspan="2">Design issue fee</td> <td></td> </tr> <tr> <td>144</td> <td>600</td> <td>244</td> <td>300</td> <td colspan="2">Plant issue fee</td> <td></td> </tr> <tr> <td>122</td> <td>130</td> <td>122</td> <td>130</td> <td colspan="2">Petitions to the Commissioner</td> <td></td> </tr> <tr> <td>123</td> <td>50</td> <td>123</td> <td>50</td> <td colspan="2">Petitions related to provisional applications</td> <td></td> </tr> <tr> <td>126</td> <td>180</td> <td>126</td> <td>180</td> <td colspan="2">Submission of Information Disclosure Stmt</td> <td></td> </tr> <tr> <td>581</td> <td>40</td> <td>581</td> <td>40</td> <td colspan="2">Recording each patent assignment per property (times number of properties)</td> <td>40</td> </tr> <tr> <td>146</td> <td>710</td> <td>246</td> <td>355</td> <td colspan="2">Filing a submission after final rejection (37 CFR § 1.129(a))</td> <td></td> </tr> <tr> <td>149</td> <td>710</td> <td>249</td> <td>355</td> <td colspan="2">For each additional invention to be examined (37 CFR § 1.129(b))</td> <td></td> </tr> <tr> <td>179</td> <td>710</td> <td>279</td> <td>355</td> <td colspan="2">Request for Continued Examination (RCE)</td> <td></td> </tr> <tr> <td>169</td> <td>900</td> <td>169</td> <td>900</td> <td colspan="2">Request for expedited examination of a design application</td> <td></td> </tr> <tr> <td colspan="6">Other fee (specify)</td> <td></td> </tr> <tr> <td colspan="6">The Commissioner is authorized to charge any additional fees to the above noted Deposit Account.</td> <td></td> </tr> <tr> <td colspan="6">*Reduced by Basic Filing Fee Paid</td> <td>SUBTOTAL (3) (\$40)</td> </tr> </tbody> </table> |  |                     |  | Large Fee Code | Entity Fee (\$) | Small Fee Code | Entity Fee (\$) | Fee Description |  | Fee Paid | 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath |  |  | 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet |  |  | 139 | 130 | 139 | 130 | Non-English specification |  |  | 147 | 2,520 | 147 | 2,520 | For filing a request for reexamination |  |  | 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action |  |  | 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action |  |  | 115 | 110 | 215 | 55 | Extension for reply within first month |  |  | 116 | 390 | 216 | 195 | Extension for reply within second month |  |  | 117 | 890 | 217 | 445 | Extension for reply within third month |  |  | 118 | 1,390 | 218 | 695 | Extension for reply within fourth month |  |  | 128 | 1,890 | 228 | 945 | Extension for reply within fifth month |  |  | 119 | 310 | 219 | 155 | Notice of Appeal |  |  | 120 | 310 | 220 | 155 | Filing a brief in support of an appeal |  |  | 121 | 270 | 221 | 135 | Request for oral hearing |  |  | 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding |  |  | 140 | 110 | 240 | 55 | Petition to revive - unavoidable |  |  | 141 | 1,240 | 241 | 620 | Petition to revive - unintentional |  |  | 142 | 1,240 | 242 | 620 | Utility issue fee (or reissue) |  |  | 143 | 440 | 243 | 220 | Design issue fee |  |  | 144 | 600 | 244 | 300 | Plant issue fee |  |  | 122 | 130 | 122 | 130 | Petitions to the Commissioner |  |  | 123 | 50 | 123 | 50 | Petitions related to provisional applications |  |  | 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt |  |  | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) |  | 40 | 146 | 710 | 246 | 355 | Filing a submission after final rejection (37 CFR § 1.129(a)) |  |  | 149 | 710 | 249 | 355 | For each additional invention to be examined (37 CFR § 1.129(b)) |  |  | 179 | 710 | 279 | 355 | Request for Continued Examination (RCE) |  |  | 169 | 900 | 169 | 900 | Request for expedited examination of a design application |  |  | Other fee (specify) |  |  |  |  |  |  | The Commissioner is authorized to charge any additional fees to the above noted Deposit Account. |  |  |  |  |  |  | *Reduced by Basic Filing Fee Paid |  |  |  |  |  | SUBTOTAL (3) (\$40) |
| Large Fee Code  | Entity Fee (\$) | Small Fee Code | Entity Fee (\$) | Fee Description   |  | Fee Paid            |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 105   | 130             | 205            | 65              | Surcharge - late filing fee or oath   |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 127   | 50              | 227            | 25              | Surcharge - late provisional filing fee or cover sheet  |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 139   | 130             | 139            | 130             | Non-English specification   |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 147   | 2,520           | 147            | 2,520           | For filing a request for reexamination  |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 112   | 920*            | 112            | 920*            | Requesting publication of SIR prior to Examiner action  |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 113   | 1,840*          | 113            | 1,840*          | Requesting publication of SIR after Examiner action   |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 115   | 110             | 215            | 55              | Extension for reply within first month  |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 116   | 390             | 216            | 195             | Extension for reply within second month   |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 117   | 890             | 217            | 445             | Extension for reply within third month  |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 118   | 1,390           | 218            | 695             | Extension for reply within fourth month   |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 128   | 1,890           | 228            | 945             | Extension for reply within fifth month  |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 119   | 310             | 219            | 155             | Notice of Appeal  |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 120   | 310             | 220            | 155             | Filing a brief in support of an appeal  |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 121   | 270             | 221            | 135             | Request for oral hearing  |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 138   | 1,510           | 138            | 1,510           | Petition to institute a public use proceeding   |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 140   | 110             | 240            | 55              | Petition to revive - unavoidable  |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 141   | 1,240           | 241            | 620             | Petition to revive - unintentional  |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 142   | 1,240           | 242            | 620             | Utility issue fee (or reissue)  |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 143   | 440             | 243            | 220             | Design issue fee  |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 144   | 600             | 244            | 300             | Plant issue fee   |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 122   | 130             | 122            | 130             | Petitions to the Commissioner   |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 123   | 50              | 123            | 50              | Petitions related to provisional applications   |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 126   | 180             | 126            | 180             | Submission of Information Disclosure Stmt   |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 581   | 40              | 581            | 40              | Recording each patent assignment per property (times number of properties)  |  | 40                  |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 146   | 710             | 246            | 355             | Filing a submission after final rejection (37 CFR § 1.129(a))   |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 149   | 710             | 249            | 355             | For each additional invention to be examined (37 CFR § 1.129(b))  |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 179   | 710             | 279            | 355             | Request for Continued Examination (RCE)   |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| 169   | 900             | 169            | 900             | Request for expedited examination of a design application   |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| Other fee (specify)   |                 |                |                 |   |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| The Commissioner is authorized to charge any additional fees to the above noted Deposit Account.  |                 |                |                 |   |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| *Reduced by Basic Filing Fee Paid   |                 |                |                 |   |  | SUBTOTAL (3) (\$40) |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |
| **or number previously paid, if greater; For Reissues, see above  |                 |                |                 |   |  |                     |  |                |                 |                |                 |                 |  |          |     |     |     |    |                                     |  |  |     |    |     |    |  |  |  |     |     |     |     |                           |  |  |     |       |     |       |  |  |  |     |      |     |      |  |  |  |     |        |     |        |   |  |  |     |     |     |    |  |  |  |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |       |     |     |   |  |  |     |       |     |     |  |  |  |     |     |     |     |                  |  |  |     |     |     |     |  |  |  |     |     |     |     |                          |  |  |     |       |     |       |   |  |  |     |     |     |    |                                  |  |  |     |       |     |     |                                    |  |  |     |       |     |     |                                |  |  |     |     |     |     |                  |  |  |     |     |     |     |                 |  |  |     |     |     |     |                               |  |  |     |    |     |    |   |  |  |     |     |     |     |   |  |  |     |    |     |    |  |  |    |     |     |     |     |   |  |  |     |     |     |     |  |  |  |     |     |     |     |   |  |  |     |     |     |     |   |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |                                   |  |  |  |  |  |                     |

| SUBMITTED BY      |   |                                   |        |           |              | Complete (if applicable) |  |
|-------------------|---|-----------------------------------|--------|-----------|--------------|--------------------------|--|
| Name (Print/Type) | Fidel D. Nwamu  | Registration No. (Attorney/Agent) | 46,294 | Telephone | 415-576-0200 |                          |  |
| Signature         |  |                                   |        | Date      | 7/1/01       |                          |  |

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